Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

PROCAPS OWCI

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
Т	OTAL CLAIMS		(Column	(Column 1)		(Column 2)		TYPE		OR	SMALL ENTITY	
TOTAL CLAIMS			3		ļ			RATE	FEE	_	RATE	FEE ·
FC)R	·	NUMBER FILED		NUMB	NUMBER EXTRA		BASIC FE	385.00	OR	BASIC FEE	770.00
TC	OTAL CHARGEA	ABLE CLAIMS	5 minus 20=		· 0			X\$ 9=		OR	X\$18=	
	DEPENDENT CI		/ minus 3 =		2	* 0		X43=		OR	X86=	
ML	JLTIPLE DEPEN	NDENT CLAIM PI	RESENT	SENT				+145=		OR	+290=	
* If	the difference	e in column 1 is	less than ze	ero, enter	"0" in c	olumn 2	1	TOTAL	720	OR	TOTAL	
CLAIMS AS AMENDED - PART II										_	OTHER	THAN
		(Column 1)		(Colum	nn 2)	(Column 3)		SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		XS 9=		OR	X\$18=	
	Independent	*	Minus	***		= .		X43=		OR	X86=	
	FIRST PRESE	ENTATION OF MU	JUIPLE DEF	ENDENI	CLAIM			+145=		OR	+290=	
	(Column 1) (Column 2) (Column 3)							TOTAL		┧╮╴┕	TOTAL	
								ADDIT, FEE] • · · · /	ADDIT. FEE	
<u>~</u>		CLAIMS		HIĞHE	EST		Г		ADDI-	1 1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL I
	Total	·*	Minus	**		= .		X\$ 9=		OR	X\$18=	
	Inaependent	×	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
		L	TOTAL		į. L	TOTAL						
·								DDIT. FEE		OR A	ADDIT. FEE	
		(Column 1)		(Colum		(Column 3)	_			_		
ENTC		REMAINING AFTER AMENDMENT		NUMBI PREVIOL PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENOMENT	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	<u> </u>
ME [Independent	*	Minus	rick		= .	-			t		
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							X43=		OR	X86=	
* If the entry in column 1 is loss than the entry is								+145=		OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***OR TOTAL ADDIT. FEE												
. T	he "Highest Num!	ber Previously Paid	For (Total or	Independer	nt) is the !	highest number	foun	d in the ann	ropriate box	in colu	mn 1	